

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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NEW HAMPSHIRE

PLEASE PRINT

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Leann Moccia, Chris Herr II. Name of lobbyist's partnership, firm or corporation, if any: Legislative Solutions, L.L.C. (Name of partnership, firm or corporation) P.O. Box 10724 Bedford 03110 (Town/City) **Business Address:** e-mail dbeek@aol.com) 603-986-9145 III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). ☐ All reportable transactions occurring in the months prior to the reporting date relative to the following client: Wheelabrator Technologies (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. April 25, 2018 🔲 July 25, 2018 🔲 IV. Date of Report activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 Reports cover: October 31, 2018 🕺 January 30, 2019 🗌 activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Signature of lobbyist)

October 18, 2018 (Date)

Debra Vanderbeek

(Print Name of lobbyist)

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client Wheelabrator Technologies	Date October 18, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified about 10 lobbying, including fees for services such as public advocacy, government of the grosseries of the reduced by any expenses:	ent relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 6500.00
Total of all fees received this calendar year, prior to this reporting perio (This should equal the total of all prior monthly reports for this calenda	
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>26,000.00</u>
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$3250.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to fees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate reportance Expenses are to be reported in one of three categories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for example, lunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lob (c) an itemized statement of each individual expenditure made during this rany purpose not covered by (a) (for example: purchase of a meal with a ceremonial object to be given to the subject of lobbying with a value gre restaurant expenses for a legislative reception). Expenses for honorariu contributions will be reported on separate addendums and should not be reported.	ch client and if expenditures are made by the may be filed for the lobbyist(s)/firm the aggregate total of all expenses pair expenses; (b) the aggregate total of all expenses than \$10 that is given to the personable with a value of \$25.00 or less); an expenting period of greater than \$25.00 for value of greater than \$25, purchase of eater than \$25, but not greater than \$50 ms, expense reimbursement, or political
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. 	a) \$ <u>6500.00</u>
b) Total aggregate of expenditures during this reporting period, not report in a), of $$25$ or less.	b) \$ 0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 6500.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 19,500.00
f) Total of all expenses year to date	f) \$ 26,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affiring true and complete to the best of my knowledge and belief.	n that the foregoing information
is true and complete to the oest of my knowledge and oener.	
(XX)	October 18, 2018
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

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Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partn	ership, firm, or corpor	ation: Legislati	ve Solutions, L.L.C.
Name of Client (leave b	lank if Statement is for	r the partnership, firm	, or corporation and not related to any
particular client):	Wheelabrat	or Technologies	
Date of Report (check o	ne):	•	
April 25, 2018 🗆	July 25, 2018 🗆	October 31, 2018	(January 30, 2019 □
			e and Expenses described above, and e number of Addendum forms being
X Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. October 18, 2018 (Date)			
, 0 0			
Robert Clegg			
(Print Name of lobbyist)			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partnership,	firm, or corporation:	Legislative Solutions, L.L.C.	
Name of Client (leave blank if	Statement is for the partner	ship, firm, or corporation and not r	elated to any
particular client):	Wheelabrator Technolo	ogies	
Date of Report (check one):			
April 25, 2018 ☐ July 2	25, 2018 🗆 October 3	1, 2018 🗖 January 30, 2019	
		,	
		of Income and Expenses describe (insert the number of Addendum	
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
1 hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. October 18, 2018 (Signature of tobbyist) (Date)			
Periklis Karoutas			
(Print Name of lobbyist)			

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Name of Lobbying part	tnership, firm, or corpo	ration: Legislative S	folutions, L.L.C.
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to ar
particular client):	Wheelabra	tor Technologies	
Date of Report (check	one):		
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018 🔀	January 30, 2019 □
			nd Expenses described above, ar umber of Addendum forms beir
/ Addendum A(s	s).		
Addendum B(s).		
Addendum C(s).		
I hereby swear or affire complete to the best of			nt and each Addendum is true ar
Llane IV	Joella	Octo	ber 18, 2018
(Signature of lobbyist)			(Date)
Leann Moccia			
(Print Name of lobbyis	t)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partne	ership, firm, or corpor	ration: Legisla	rive Solutions, L.L.C.
Name of Client (leave bla	ink if Statement is fo	r the partnership, firm	n, or corporation and not related to any
particular client):	Wheelabras	tor Technologies	
Date of Report (check on	ie):		
April 25, 2018 □	July 25, 2018 🛚	October 31, 2018 [☐ January 30, 2019 ☐
			ne and Expenses described above, and he number of Addendum forms being
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
complete to the best of m	~ ~	ief.	ement and each Addendum is true and October 18, 2018
(Signature of loobyist)			(Date)
Christopher Herr (Print Name of lobbyist)			